

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Handwritten initials</i>	<i>32</i>	<i>07-10-01</i>
O.I.P.E. CLASSIFIER	<i>Handwritten initials</i>		
FORMALITY REVIEW	<i>SH</i>	<i>1085</i>	<i>8-22-01</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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EST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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JCH  
 8/22/01